

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>12/28/99</u>		2 Serial/Patent # <u>09/456877</u>	
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing			\$ <u>666.-</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
7 TOTAL AMOUNT OF REFUND			\$ <u>660.-</u>
8 TO BE REFUNDED BY:			
<input checked="" type="checkbox"/> Treasury Check			
9 Credit Deposit A/C #: <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></div>			
10 REASON:			
<input checked="" type="checkbox"/> Overpayment			
<input type="checkbox"/> Duplicate Payment			
<input type="checkbox"/> No Fee Due (Explanation):			
Address → <u>GRAHAM & SARGES LLP -</u>			
<u>ATTORNEYS AT LAW</u>			
<u>801 SO. FIGUEROA ST 14TH FL. LOS ANGELES CA</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>MARIAN DAY</u>		TITLE: <u>L.I.L</u>	
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308-9483</u>	
OFFICE: <u>OIPB</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>[Signature]</u>		DATE: <u>12/28/99</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: